STATE OF HAWAII SMALL PURCHASE WRITTEN QUOTATIONS

Date:				
Company Name:		Phone / Fax No.: /		
Address:		City/State/Zip Code:		
Vendor Represer	ntative:			
PROVIDE A QU	OTATION for the following good/service/construc	etion (Describ	e or □ see attache	d specifications):
QUOTATIONS	S REQUESTED BY (mail or fax this quotation by _	(date)	(time)	to the following):
Address City/State/Zip Code:				
Contact Person Phone / I		/ Fax No/		
	VENDOR TO COMPLETE THE SE	ECTION BE	LOW =====	
Item No.	Description of item(s)	QTY	UNIT PRICE	TOTAL PRICE
Additional information or terms (i.e. delivery time, warranty period, etc.):			Shipping/ Handling	
			State Tax	
			TOTAL	
Ouete Ne	Drigg(a) abolt representations for	daya	SUM PRICE	
Quote No.		_ uays.		
Vendor Represer	Signature Signature	date		
	Title:			